

**AFFIDAVIT IN  
SUPPORT OF  
NONDISCLOSURE  
OF INFORMATION  
UNDER THE  
UNIFORM  
INTERSTATE  
FAMILY SUPPORT  
ACT (UIFSA) -  
EXAMPLE**

**AFFIDAVIT IN SUPPORT OF NONDISCLOSURE OF INFORMATION  
UNDER THE UNIFORM INTERSTATE FAMILY SUPPORT ACT (UIFSA)**

[Custodial Parent Name], first duly sworn, states that the health, safety, or liberty of myself, my children, or both, would be unreasonably put at risk by the disclosure of our address or other identifying information because:

- ☐ I have a pre-existing court order for confidentiality. (Copy Attached)
- ☐ I have a Personal Protection, Ex Parte, or Restraining order against the other party. (Copy Attached)
- ☐ I have reason to fear physical abuse, harassment and/or stalking. Explain:  
\_\_\_\_\_  
\_\_\_\_\_
- ☐ I have reason to fear parental kidnapping. Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- ☐ The other party has a criminal record. Explain: \_\_\_\_\_  
\_\_\_\_\_
- ☐ Other. Explain in detail: \_\_\_\_\_  
\_\_\_\_\_

FURTHER YOUR AFFIANT SAYETH NOT.

\_\_\_\_\_  
date

\_\_\_\_\_  
custodial parent signature

Subscribed and sworn before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 1997

\_\_\_\_\_  
Notary Public

my commission expires: \_\_\_\_\_